



Applicant: Klaus Sommermeyer

Application No.: 10/542,944

Group: 1623

371(c) Filing Date: September 27, 2005

Examiner: Everett White

Confirmation No.: 2584

For: CARBONIC ACID DIESTERS, METHODS FOR THE PRODUCTION THEREOF AND METHODS FOR THE PRODUCTION OF PHARMACEUTICAL ACTIVE SUBSTANCES COUPLED TO FREE AMINO GROUPS WITH POLYSACCHARIDE OR POLYSACCHARIDE DERIVATIVES

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

36-09 Sandya Jammal  
Date Signature  
Sandya Jammal

Typed or printed name of person signing certificate

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Reply for filing in the above-identified application.

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

**The claims fee has been calculated as shown below:**

|  |    |       | SMALL ENTITY |                | OTHER THAN SMALL ENTITY |                |
|--|----|-------|--------------|----------------|-------------------------|----------------|
|  |    |       | RATE         | ADDITIONAL FEE | RATE                    | ADDITIONAL FEE |
| TOTAL  | 19 | MINUS | *            | 30             | X \$26                  | \$             |
| INDEP  | 1  | MINUS | **           | 3              | X \$110                 | \$             |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |    |       | + \$195      | \$             | + \$390                 | \$             |
|  |    |       | TOTAL = \$ 0 |                | TOTAL = \$ 0            |                |

\* not fewer than 20  
\*\* not fewer than 3

**The Application Size Fee has been calculated as shown below:**

(Effective for cases filed on or after December 8, 2004)

| Actual Sheets (Including current amendment) | Highest No. of Sheets Paid For (At least 100) | No. of Additional Units Required (Increments of 50 sheets) | SMALL ENTITY |                   | OTHER THAN SMALL ENTITY |                   |
|---|---|--|--------------|-------------------|-------------------------|-------------------|
|   |   |  | Rate         | Total Amount Owed | Rate                    | Total Amount Owed |
| 19  | 100   |  | X \$135      | \$[ ]             | X \$270                 | \$[ ]             |

Payment Sufficient for up to 100 Sheets

#### Petition for Extension of Time

- Applicant hereby petitions to extend the time to respond to the Office Action dated October 6, 2008 for two month(s) from January 6, 2009 to March 6, 2009. The appropriate fee is set forth below.
- [For action-specific language in an extension of time, select the appropriate option from the Firm Templates]

**Please charge Deposit Account No. 08-0380 for the following fees:**

|                          |  |                        |
|--------------------------|--|------------------------|
| <input type="checkbox"/> | Petition for [ ] month Extension of Time | \$ _____               |
| <input type="checkbox"/> | Claims Fee                               | \$ _____               |
| <input type="checkbox"/> | Application Size Fee                     | \$ _____               |
| <input type="checkbox"/> | Other Fees:                              | \$ _____               |
|                          |  | \$ _____               |
|                          |  | \$ _____               |
|                          |  | <b>TOTAL:</b> \$ _____ |

**A check is enclosed in payment of the following fees:**

|                                     |  |                      |
|-------------------------------------|--|----------------------|
| <input checked="" type="checkbox"/> | Petition for two month Extension of Time | \$ 490               |
| <input type="checkbox"/>            | Claims Fee                               | \$ _____             |
| <input type="checkbox"/>            | Application Size Fee                     | \$ _____             |
| <input type="checkbox"/>            | Other Fees:                              | \$ _____             |
|                                     |  | \$ _____             |
|                                     |  | \$ _____             |
|                                     |  | <b>TOTAL:</b> \$ 490 |

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

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Dated:

3/6/9